



**COOPERATIVE AGREEMENT  
SCHOOL DISTRICTS SHARING INSTRUCTOR(S)**

Department of Career and Technical Education  
SFN 50279 (10/03)

State Capitol 15<sup>th</sup> Floor  
600 East Boulevard Ave Dept 270  
Bismarck ND 58505-0610  
Phone 701-328-3180  
Fax 701-328-1255

School District Issuing Teacher's Contract		July 1, _____ to June 30, _____	
School District Receiving Services			
CTE Programs		State Use	
<p>The signature assures that the applying agency does not advocate, permit, nor practice discrimination on the basis of sex, race, color, national origin, religion, age, or disability as required by various state and federal laws.</p> <p>Signature of authorized official of applicant organization verifies that the applicant has the necessary legal authority to apply for and to receive funding for the proposed activity.</p>			

The information provided accurately describes the proposed cooperative arrangement and is agreed to by both school districts.

Administrator of School Issuing Teacher's Contract	Signature	Date
Administrator of School Receiving Services	Signature	Date

STATE USE		
Approved      Disapproved      Deferred Action	Signature of CTE Administrator	Date

Retain a copy for your records.